

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD **SANTA ANA REGION** NOTICE OF INTENT



TO COMPLY WITH THE TERMS AND CONDITIONS OF THE Riverside County MS4 Permit ORDER NO. R8-2009-0033 **NPDES NO. CAS 618033**

I. PERMITTEE (*Person/Agency Responsible for the Discharge*)

San Bernardino County MS4 Permit ORDER NO. R8-2009-0036 **NPDES NO. CAS618036**

REGARDING DISCHARGE OF WASTEWATER THAT POSE INSIGNIFICANT (DE MINIMUS) THREAT TO WATER QUALITY

Agency/Compa		•	,	
Name:				
City	State	7IP	Contact Person:	-
Phone: (_; Email:	Contact Person:	.,
II. FACILITY				
Address/Stree	<u>t</u>			
City	State	ZIP	Contact Person:	:
Phone: (_; Email:	Contact Person:	٠,
	low Rate (gpd):			
b. Receiving W	Vater (identify):		'	
III. INDICATE	EXISTING PERMI	T NUMBER: (if an	oplicable)	
			NPDÉS No	
b. General Per	rmit Order No. R8-2	2009-003-		
				
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IV. CERTIFIC	ΔΤΙΟΝ:			
	-	l am an authorizo	d representative of the permittee and that I	
			information submitted in this application and	
			ose persons immediately responsible for	
			on, I believe the information is true, accurate	
			penalties for submitting false information,	
			n addition, I certify that the permittee will	
			Orders No. R8-2009-0003 and (R8-2009-0033	í
			itoring and reporting program issued by the	
	cer of the Regional			
Name:			Title:	_
(type or print)	(type or print)	_		
Signature:	:;			
Email:				

Remarks: If changes to facility ownership and/or treatment processes were made after the issuance of the existing permit, please provide a description of such changes on another sheet and submit it with this Notice of Intent.

V. OTHER REQUIRED INFORMATION - FOR NEW DISCHARGERS AND FOR NEW DISCHARGES AND LOCATIONS NOT PREVIOUSLY REPORTED BY EXISTING DISCHARGERS.

Please provide a COMPLETE characterization of your discharge. A complete characterization includes, but is not limited to:

- a. A list of constituents and the discharge concentration of each constituent;
- b. The estimated average and maximum daily flow rates at unit of gallons per day(gpd); the frequency and duration of the discharge and the date(s) when discharge will start:
- c. The proposed discharge location(s) as latitude and longitude for each discharge point;
- d. A description of the proposed treatment system (if appropriate);
- e. The affected receiving water; the receiving water(s) shall be
 - 1). receiving storm drain/creek, and/or
 - 2). the ultimate receiving water, such as the Pacific Ocean, or the Reach 3 of Santa Ana River, or the Lake;
- f. A map showing the path from the point of initial discharge to the ultimate receiving water. Please try to limit your maps to size of 8.5" X 11".
- g. A list of known or suspected leaking underground tanks and other facilities or operations that have, or may have impacted the quality of the underlying groundwater within 200 feet of the site property lines for projects with expected discharge flow rates of less than 100,000 gallons per day and within 500 feet of the site property lines for projects with expected discharge flow rates of greater than 100,000 gallons per day.
- h. Any other information deemed necessary by the Executive Officer.

VI. OTHER

Attach additional sheets to explain any responses which need clarification. List attachments with titles and dates below:

You will be notified by a representative of the RWQCB within 30 days of receipt of your application. The notice will state if your application is complete or if there is additional information you must submit to complete your application, pursuant to Division 7, Section 13260 of the California Water Code.